



DECLARATION FOR PATENT APPLICATION

Docket Number (Optional)

Ay residence, post office address and obtizenship are as stated below next to my name. believe I am the original, first and sole Invertor (if only one name is listed below) or an original, first and joint inventor (if plura arress are listed below) or an original, first and joint inventor (if plura arress are listed below) or an original, first and joint inventor (if plura arress are listed below) or an original, first and joint inventor (if plura arress are listed below) or an original, first and joint inventor (if plura arress are listed below) or an original, first and joint inventor and the same are as a state-ord hereous original, first and joint inventor and with a subject to the short of the above identified specification of which is a state-ord hereous and understand the contents of the above identified specification, including the claims, as mended by any amendment referred to above. As a state-ord hereous are all the contents of the above identified specification, including the claims, as mended by any amendment referred to above. As a state-ord hereous arress are all the contents of the above identified specification, including the claims, as mended by any amendment referred to above. As a state-ord hereous arress are all the contents of the above identified specification for patient or inventor's conflictate strated below and have also identified below any foreign application for patient or inventor's conflictate isted below and have also identified below any foreign application for patient or inventor's conflictate awing a filing date before that of the application on which promity is claimed. (Number) (County) (Dey/Month/Year Field) Promy Claimed (Number) (Count	Ay residence, post office address believe I am the original, first sames are listed below of the AME CONTROLLER WI s attached hereto unless the forward was filed on	and sole inventor (if only one name is subject matter which is claimed and ITH ANALOG PRESSURE Sollowing box is checked:	e listed balow) or an original first ar	nd joint inventor (if plural
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nereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the attent and Trademark Office connected therewith: NONE didress all telephone calls to Brad A. Armstrong at telephone number 916 872 9148 didress all correspondence to Brad A. Armstrong P.O. Box 1419 Paradise, CA 95967 hereby declare that all statements made herein of my own knowledge are true and that all statements made on information an elief are believed to be true; and further that these statements were made with the knowledge that willful false statements and se so made are punishable by fine or imprisonment, or both, under Section 1001 of Talle 18 of the United States Code and that sch willful false statements may jeopardize the validity of the application or any patent issued thereon. Ull name of sole or first inventor-(given name-family-name) Brad A. Armstrong Date Ottober 1997 Citizenship USA Ost Office Address Brad A. Armstrong, P.O. Box 1419, Paradise, CA 95967 ull name of second joint inventor, if any (given name, family name) December 1996 Date Citizenship Citizenship Citizenship Citizenship	pplication Number)	(Filing Date)	(Status – pa	tented, pending, abandoned
didress all telephone calls to didress all correspondence to Brad A. Armstrong Brad A. Armstrong Brad A. Armstrong P.O. Box 1419 Paradise, CA 95967 Thereby declare that all statements made herein of my own knowledge are true and that all statements made on information an ablef are believed to be true; and further that these statements were made with the knowledge that willful false statements and exch willful false statements may jeopardize the validity of the application or any patent issued thereon. Brad A. Armstrong Date Other (1997) Citizenship USA Citizenship USA Citizenship USA Citizenship Date Citizenship Date Citizenship Date Citizenship Date Citizenship Date Citizenship Citizenship Citizenship Citizenship Citizenship Date Citizenship	pplication Number)	(Filing Date)	(Status - pat	tented, pending, abandoned
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OMB No. 0651-0011 (12/31/86)

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Applicant or Patentee:	Brad A.	Armstrong		Attorney's
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iled or Issued: CONTROL or: GAME	LER WITH	ANALOG PRESSU	RE SENSOR(S	
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VEDIE	IED STATEMI	ENT (DECLARATION)	CLAIMING SMALL	ENTITY
STA	TUS (37 CFR I	.9 (f) and 1.27/(b)) — 13	DEPENDENT INV	ENTOR
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As a below named inventor, oses of paying reduced fees office with regard to the intestribed in	I hereby declare under section entitled	that I qualify as an indep 4 (a) and (b) of Title 3 4 GAME CONTROLI	sendent inventor as de 5. United States Code, ER WITH ANA	efined in 37 CFR 1.9 (c) for pur- e, to the Patent and Trademark LOG PRESSURE SENSOF
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ach person, concern or org nder contract or law to ass	anization to whigh	nich I have assigned, gran vey, or license any rights	ited, conveyed, or lice in the invention is li	ensed or am under an obligation isted below:
[X] no such person, co	ncern, or organ or organization	nization s listed below ^e	•	
*NOTE: Separation having righ	ie verified state ts to the invent	ments are required from ion averring to their stat	each named person, ous as small entities. (oncern or organiza- 37 CFR 1.27)
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